PTO/SB/06 (12-04)

Approved for use through 7/31/2006, OMB 0651-0032

U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**Sperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									10-42.8990		
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY	OR	OTHER SMALL	
	FOR	NUME	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	SIC FEE CFR 1.16(a), (b), or	(en	NA		NA		NA			N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (re))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1.16(0), (p), or (q))			N/A		N/A		N/A			NA	
TO	TAL CLAIMS	(4)	minus 2	0.			х =		OR	х =	
IND	OFR 1.16(1)) EPENDENT CLA OFR 1.16(h))	IMS	minus 3 •				х =			x =	
APF	PLICATION SIZE	sheets of the state of the stat	If the specification and drawings exheets of paper, the application sizes \$250 (\$125 for small entity) for eadditional 50 sheets or fraction the 35 U.S.C. 41(e)(1)(G) and 37 CFR								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16())							N/A			N/A	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
AMENDMENT A	7/10/	COLUMN 1) CLAIMS REMAINING AFTER AMENDMENT	AMEN	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		SMALL I	ADDI- TIONAL FEE (\$)	OR	OTHER SMALL RATE (\$)	
	Total (37 CFR 1.16(1))	29	Minus	29	· Ø		χ =		OR	x 50	
	Independent (37 CFR 1.16(h))	. <	Minus	<u>"</u> 5	- ()		x =		OR	x 200 =	
ME	Application Size Fee (37 CFR 1.16(s))										
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						N/A		OR	N/A	
						_	ADO'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.1603)	•	Minus	-	•		x =		OR	х =	
	Independent (37 CFR 1.18(h))	•	Minus	***	=		х =		OR	x e	
	Application Size Fee (37 CFR 1.16(s))										
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())						N/A		OR	N/A	
							TOTAL ADO'L FEE		OR	TOTAL ADO'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradsmark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. D NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.